April 2019

#### Chumash Lodge 90



#### **Upcoming Events**

Spring Ordeal May 17-19 at Rancho Alegre

Summer Fellowship July. 13-14 at Rancho Alegre

Summer Order Aug. 23-25 at Rancho Alegre

Section Conclave Sept. 20-22 at Veterans Memorial Park, Sylmar

Want to be an Elangomat?



Contact to help out!
Activities@chumashlodge90.net

# The Bear Claw

#### 2018 - 2019 Lodge Officers

Lodge Chief Lodge Vice Chief Lodge Secretary Lodge Treasurer Jase Meyer Andrew Murach Joseph Cooper Ben Bishop

## Canaliño Camping Trip Success.

March 16, following a meeting by the Lodge Executive Committee, 16 Arrowmen stayed in Larsen Meadow for an overnight fellowship hosted by Canaliño Chapter. The members present had the opportunity to shoot shotguns, enjoy great meals courtesy of the advisers, and enjoy an amazing bonfire. The chapter hopes to have more events like these in the future as a way to have more fellowship in the Order.

## Ceremonialists needed for NOAC 2020

Aug. 3-8, 2020 at Michigan State University.

While 2020 may seem off and in the distance for a lot of us, it is an event our Ceremonies team is already anticipating. Our goal is to compete in every competition, with as many ceremonialists as possible. More information about general signups will come soon. If you would like to be on one of the ceremonies teams, just contact ceremonies@chumashlodge90.net. No previous experience is needed, as it we will have opportunities for practice and advise.

# "The Sky is the Limit" at the 2019 Section Conclave

Sept. 20-22 at Veterans Memorial Park, Sylmar

Chumash Lodge hopes to soar at this years conclave with a contingent of at least 35 Arrowmen. Arrowmen attending will have the opportunity to learn from various trainings, enjoy fellowship activities, compete in ceremonies competitions, and so much more. Registration for the 2019 Section Conclave is open and available at sectionw4n.org/conclave, and the current price is \$45 (price will increase in August).

#### Social Media Team Recruiting

The Chumash Lodge 90 Social Media Team needs arrowmen to help get pictures, stories, and such to post on their various social media platforms. If you're interested in helping out this team, whether it is by joining it or simply submitting content, contact social@chumashlodge90.net.

#### The Bear Claw

"Imagine hiking through some of the same territories as Waite Phillips, Dr. Goodman and other noteworthy Scouting figures. Imagine forming a team, coming into an experience as strangers, but leaving as friends for a lifetime. Few people get to experience the world's natural beauty and understand what true fellowship is all about. This summer, the Order of the Arrow invites you to this rare occasion and to participate in the OA High Adventure program."



#### **HIGH ADVENTURE**



The Order of the Arrow offers five unique High Adventure oppurtunities for it's members.

Canadian Odyssey
Two Weeks at Northern Tier
(Canada)

Ocean Adventure Seven Days at Sea Base

Summit Experience

Eight Days at the Summit

Trail Crew
Two Weeks at Philmont

Wilderness Voyage
Two Weeks at Northern Tier (USA)

Check out the website: oa-bsa.org/high-adventure for more information!

### Chiefly Speaking

Brothers,

I hope that you have been having a great 2019 so far, filled with numerous adventures. In the past months we have had a lot going on within the lodge. At the end of this past



July, our lodge sent a ten person contingent to the National Order of the Arrow Conference (NOAC) at Indiana University. The trip was a great fellowship experience for all those that attended, and a great opportunity for our Arrowmen to receive important training.

In September at the Section Conclave, Chumash Lodge swept the majority of the awards. Firstly, we met and exceeded our membership attendance goal. We had thirty two arrowmen in attendance. Our ceremonialists did a spectacular job in the ceremonial competitions, winning the Pre-Ordeal, Brotherhood, and Vigil. On top of all of that, we took home the best lodge award for the second conclave in a row! In addition to that, our arrowmen attended numerous trainings and fun activities.

Over the past few months we have been working with the chapters to do the unit elections and bridging ceremonies for the different units across the council. More recently we had a fellowship camping trip in Larsen's Meadow, where we had shotgun shooting and many other events.

The lodge will be having an exhibit during the Scout-o-Rama at the Madonna Inn in San Luis Obispo on May 4th. We will have be setting up a tipi and having Native American necklace crafts for the event. This event is very important to get the Order of the Arrow out into the council, so all the help we can get in appreciated.

The spring ordeal on May 17-19 is fast approaching and I hope that all of you can make it! We will be holding the ordeal in Larsen's meadow due to the construction occurring in the main part of Rancho Alegre. We will be working on rebuilding the upper campfire bowl as well as general maintenance around the camp. We will need all of the help we can get to complete these projects. The summer ordeal will be held on August 23-25.

Finally, Brothers that haven't paid their dues for 2019 are highly encouraged to do so.

Yours in Brotherhood, Jase Meyer

#### **CHUMASH LODGE 90**

**ORDER OF THE ARROW** 

#### 2019 Spring/Summer Ordeal May 17-19 **August 23-25** Rancho Alegre



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Please complete this form and return with your payment. Payments must reach us no later than 4 pm on Wednesday before the Ordeal (May 15 or August 21) to avoid a late fee. Send to:

**Order of the Arrow** 

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# ACTIVITY CONSENT FORM AND APPROVAL BY PARENTS OR LEGAL GUARDIAN FORMULARIO DE CONSENTIMIENTO Y APROBACIÓN DE ACTIVIDAD POR PARTE DE LOS PADRES DE FAMILIA O TUTORES

The recommended use of this form is for the consent and approval for Cub Scouts, Boy Scouts, Varsity Scouts, Venturers, and guests to participate in a trip, expedition, or activity. It is required for use with flying plans.

El uso recomendado de este formulario es para obtener el consentimiento y aprobación para Cub Scouts, Boy Scouts, Varsity Scouts, Venturers, e invitados para participar en un viaje, expedición o actividad. Es obligatorio para su uso con planes de vuelo.

First name of participant Nombre del participante	Middle initi Inicial del segundo			
Birth date (month/day/year) / _ Fecha de nacimiento (mes/día/año)		Age during activity Edad al momento de realizar la actividad		
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INFORMED CONSENT, RELEASE AGREEMENT, AND AUTHORIZA	ATION	CONSENTIMIENTO INFORMADO, CONVENIO DE EXONERAC	CIÓN Y AUTORIZACIÓN	
I understand that participation in Scouting activities involves the risk of persor death, due to the physical, mental, and emotional challenges in the activities of about those activities may be obtained from the venue, activity coordinators, or landerstand that participation in these activities is entirely voluntary and requires painstructions and abide by all applicable rules and the standards of conduct.	offered. Information local council. I also	Entiendo que la participación en actividades Scouting implica el riesgo de l muerte, debido a los retos físicos, mentales y emocionales en las actividades información sobre dichas actividades en la sede, con los coordinadores d También entiendo que la participación en estas actividades es totalmen participantes sigan instrucciones y acaten todas las reglas y normas de cor	que se ofrecen. Se puede obtener de la actividad o el concilio local. nte voluntaria y requiere que los	
In case of an emergency involving my child, I understand that efforts will be m In the event I cannot be reached, permission is hereby given to the medical provid treatment, including hospitalization, anesthesia, surgery, or injections of medic Medical providers are authorized to disclose protected health information to the a or any physician or health care provider involved in providing medical care Protected Health Information/Confidential Health Information (PHI/CHI) under Privacy of Individually Identifiable Health Information, 45 C.F.R. \$\$160.103, 164 amended from time to time, includes examination findings, test results, and for purposes of medical evaluation of the participant, follow-up and comm participant's parents or guardian, and/or determination of the participant's ability program activities.	er to secure proper ation for my child. adult in charge and/ to the participant. the Standards for 1.501, etc. seq., as treatment provided unication with the	En caso de que mi hijo se vea involucrado en una emergencia, entiendo que se realizarán esfuerzos para contactarme. En caso de que yo no pueda ser localizado, por este medio otorgo permiso al proveedor de servicios médicos para garantizar el tratamiento adecuado, incluyendo hospitalización, anestessia, cirugía o inyecciones de medicamentos para mi hijo. Los proveedores de servicios médicos están autorizados a revelar información médica protegida al adulto a cargo, médico o proveedor de servicios médicos involucrado en la prestación de atención médica para el participante. La Información de salud protegida/Información médica confidencial (PHI/CHI, por sus siglas en inglés) bajo los Estándares de privacidad de información médica individualmente identificable, 45 C.F.R. §§ 160.103, 164.501, etc., y siguientes, como se enmiendan de vez en cuando, incluyen resultados de reconocimientos médicos, resultados de pruebas y el tratamiento proporcionado para fines de evaluación médica del participante, seguimiento y comunicación con los padres o tutor legal del participante, o determinación de la capacidad del participante para continuar en las actividades del programa.		
With appreciation of the dangers and risks associated with programs and a preparations for and transportation to and from the activity, on my own behalf and child, I hereby fully and completely release and waive any and all claims for per or loss that may arise against the Boy Scouts of America, the local council, the ac and all employees, volunteers, related parties, or other organizations associated or activity.	d/or on behalf of my sonal injury, death, stivity coordinators,	Con reconocimiento de los peligros y riesgos asociados con los programas y actividades incluyendo preparativos y transportación hacia y desde la actividad, en mi propio nombre o en nombre de mi hijo, por este conducto eximo total y completamente, y renuncio a cualquiera y toda reclamación por lesiones personales, muerte o pérdidas que puedan surgir, a la organización Boy Scouts of America, el concilio local, los coordinadores de la actividad y todos los empleados, voluntarios, grupos involucrados, u otras organizaciones asociadas con cualquier programa o actividad.		
NOTE: The Boy Scouts of America and local councils cannot continually mon program participants or any limitations imposed upon them by parents or medical restrictions imposed on a child participant in connection with programs or accounsel your child to comply with those restrictions.	l providers. List any	NOTA: La organización Boy Scouts of America y los concilios locales no cumplimiento de los participantes del programa o cualquier limitación imp proveedores de servicios médicos. Enumerar más abajo las restricciones en relación con los programas o actividades.	uesta sobre ellos por los padres o	
List participant restrictions, if any: None		Restricciones del participante, si existen: Ninguna		
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Contact the adult leader with any questions: Póngase en contacto con el líder adulto si es que tiene preguntas:				
NameNombre	_ Phone	EmailCorren electrónico		

